

IN THE UNITED STATES PATENT AND TRADE MARK OFFICE

Applicants: ZHANG et al

Serial No.: 09/870,338

Art Unit: 1636

Filed : May 30, 2001

Examiner:

For : NEUROBLASTOMA CELL LINES EXPRESSING THE  $\alpha 2\delta$   
SUBUNIT OF CALCIUM CHANNELS AND METHODS THEREFORE

I hereby certify that this correspondence is being deposited with the  
United States Postal Service as first class mail in an envelope addressed  
to: Box Missing Parts, Commissioner for Patents, Washington, DC 20231 on

October 30, 2001

(Date of Deposit)

Myra H. McCormack

(Name of applicant, assignee, or Registered Representative)

Myra H. McCormack  
(Signature)October 30, 2001

(Date of Signature)

BOX MISSING PARTS  
Commissioner for Patents  
Washington, D.C. 20231

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Sui Po Zhang entitled NEUROBLASTOMA CELL LINES EXPRESSING  $\alpha 2\delta$  SUBUNIT OF CALCIUM CHANNELS AND METHODS THEREFORE attorney Docket No. ORT-1440, to complete, pursuant to Rule 51, this application filed on October 30, 2001 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/ORT-1440/MHM in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/ORT-1440/MHM. This sheet is submitted in triplicate.

Respectfully submitted,

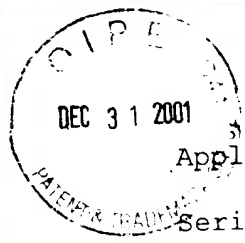
Myra H. McCormack

Myra H. McCormack

Reg. No. 36,602

Attorney for Applicant(s)

Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003



DOCKET NO. ORT-1440  
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Myra H. McCormack  
(Signature)

October 30, 2001

(Date of Signature)

Commissioner For Patents  
Washington, D.C. 20231

PETITION FOR EXTENSION OF TIME  
AND AUTHORIZATION TO CHARGE  
DEPOSIT ACCOUNT THEREFOR

Dear Sir:

Applicant(s) petition(s) the Commissioner of Patents and Trademarks to extend the time for response to the Office Action dated August 1, 2001 for One(1) month(s) from October 1, 2001 to November 1, 2001. An Executed Declaration and Power of Attorney responding to the aforesaid Office Action is being filed concurrently herewith.

Please charge Deposit Account No. 10-0750/ORT1440/MHM in the name of Johnson & Johnson for the cost of filing this Petition. Three copies of this Petition are enclosed.

Respectfully submitted,

Myra H. McCormack

Myra M. McCormack

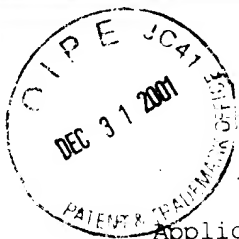
Reg. No. 36,602

Attorney for Applicant(s)

01/03/2002 AWONDAF1 00000027 100750 09870338

02 FC:115 110.00 CH

Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003  
(732) 524-6932  
DATE: October 30, 2001



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(Name of applicant, assignee, or Registered Representative)

*Myra H. McCormack*  
(Signature)

October 30, 2001

(Date of Signature)

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*Myra H. McCormack*

Myra M. McCormack

Reg. No. 36,602

Attorney for Applicant(s)

Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003  
(732) 524-6932  
DATE: October 30, 2001

DEC 31 2001

Please type a plus sign (+) inside this box ☐PTO/SB/01 (10-00)  
Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION  
AND  
POWER OF ATTORNEY  
FOR UTILITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**☐ Declaration Submitted with  
Initial Filing **OR** ☒ Declaration Submitted after  
Initial Filing (Surcharge  
(37 CFR 1.16(e)) required)

Attorney Docket Number	ORT-1440
First Named Inventor	ZHANG, Sui-Po et al.
COMPLETE IF KNOWN	
Application Number	09/870,338
Filing Date	May 30, 2001
Group Art Unit	
Examiner Name	

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.  
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NEUROBLASTOMA CELL LINES EXPRESSING THE  $\alpha 2\delta$  SUBUNIT OF CALCIUM CHANNELS AND METHODS  
THEREFORE  
(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 05/30/2001 as United States Application Number or PCT International Application  
Number ☐ and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

## DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number 000027777 → Place Customer Number Bar Code Label Here

**AND**

☐ Practitioner(s) named below:  
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Myra H. McCormack at telephone number (732) 524-6932.

Direct all correspondence to: ☒ Customer Number 000027777 OR ☐ Correspondence address below

**Name:**

**Address:**

**Address:**

**City:**

**State:**

**ZIP**

**Country**

**Telephone:**

**Fax:**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Sui-Po

Family Name  
or Surname ZHANG

Inventor's  
Signature

*Sui-Po*

Date

*10/17/01*

Residence: City Bala Cynwyd

State PA

Country USA

Citizenship China

Mailing Address 535 Ott Road

City Bala

State PA

ZIP 19004

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Susan K.

Family Name  
or Surname YAGEL

Inventor's  
Signature

*Susan K Yagel*

Date

*10-17-01*

Residence: City Hatfield

State PA

Country USA

Citizenship USA

Mailing Address 3099 Line Lexington Road

City Hatfield

State PA

ZIP 19440

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Ellen E.

Family Name  
or Surname CODD

Inventor's  
Signature

*Ellen Codd*

Date

*October 17, 2001*

Residence: City Blue Bell

State PA

Country USA

Citizenship USA

Mailing Address 736 Cathcart Road

City Blue Bell

State PA

ZIP 19422

Country USA